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PATENT, TRADEMARK
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Date: May 10, 2006

FACSIMILE COVER LETTER

Facsimile Number: 571-273-8300

To: Examiner CRAIG A. RENNER
Group Art Unit 2627, USPTO


From: Mr. Daniel J. Stanger
MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re: USSN 10/765,108
Attorney Docket No.: 500.43441X00

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

PTO-1083 TRANSMITTAL; AND
REPLY (INCLUDING ONE REPLACEMENT
SHEET OF FIG. 27).


Daniel J. Stanger
Reg. No. 32,846

May 10, 2006

Date

Total Number of Pages (including cover sheet): 18

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Form PTO-1083

Patent

Case Docket No. 500.43441X00

In RE application of S. NISHIYAMA et al.

Serial No.: 10/765,108

Group Art Unit: 2627

Filed: January 28, 2004

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For: FLEXIBLY STRUCTURED CASING FOR STORAGE
APPARATUS ACCOMMODATING DIFFERENT
SCALES (AS AMENDED)

Examiner: CRAIG A. RENNER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

May 10, 2006

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☒ No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)			(Col. 2)		(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra	Rate	Additional Fee		Rate	Additional Fee
Total	18	Minus	** 20	=	0	X 25	\$		X 50	\$
Indep.	3	Minus	*** 3	=	0	X 100	\$		X 200	\$
First presentation of Multiple Dependent Claims						X 180	\$		X 360	\$
						Total	\$		Total	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Please charge my Deposit Account No. 50-1417 in the amount of \$_____.

A Credit Card Payment Form in the amount of \$_____ is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.

Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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By:

Daniel J. Stanger
Daniel J. Stanger, Reg. No. 32,846
Attorney for Applicant(s)

Date: May 10, 2006

500.43441X00

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

S. NISHIYAMA, et al

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Serial No.: 10/765,108

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Filed: January 28, 2004

Examiner: CRAIG A. RENNER

For: FLEXIBLY STRUCTURED CASING FOR
STORAGE APPARATUS ACCOMMODATING
DIFFERENT SCALES (AS AMENDED)

REPLY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

May 10, 2006

Sir:

In Reply to the Office Action mailed February 10, 2006, please amend the application as set forth below.